

<p>To: U.S. Department of Commerce Patent and Trademark Office</p> <p style="text-align: center;">Information Disclosure Statement by Applicant</p> <p style="text-align: center;">FORM PTO-1449 (modified)</p> <p style="text-align: right;">OCT 20 2003</p> <p style="text-align: center;">U.S. PATENT & TRADEMARK OFFICE</p>				Attorney Docket No.: 2544-0404							
				Client Reference No.: Unknown							
				Applicant: QUBTI, Marwan et al.							
				Appln. No.: 10/676,000							
				Filing Date: October 2, 2003							
Date: October 20, 2003		Page 1 of 1		Examiner: <u>Abel Abdellatif</u>	Group Art Unit: <u>Z165</u>						
U.S. PATENT DOCUMENTS											
Examiner's Initials		Document Number	Date MM/YYYY	Name (Family Name of First Inventor)	Class	Sub Class	Filing Date (if appropriate)				
<u>MJG</u>	AR	5,983,194	11/09/1999	Hogge et al.							
↓	BR	6,138,104	10/24/2000	Marchak et al.							
↓	CR	6,539,404	03/25/2003	Ouchi							
DR											
ER											
FR											
GR											
HR											
IR											
JR											
KR											
LR											
MR											
NR											
FOREIGN PATENT DOCUMENTS					English Abstract		Translation Readily Available				
	Document Number	Date MM/YYYY	Country	Inventor Name	Enclosed	No	Enclosed	No			
OR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
PR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
QR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
RR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
SR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
TR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
UR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
VR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
WR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
XR					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
OTHER (Including in this order Author, Title, Periodical Name, Pertinent Pages, etc.)											
YR								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
ZR								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Examiner: <u>Abel Abdellatif</u>	Date Considered: <u>9/14/01</u>										

*EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP § 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to Applicant.